MULTIPLE DEPENDENT CLAIM								SERIAL N	О.			FILING DA	TE	
								09/857733 APPLICANT(S)						
FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)								APPLICA	NT(S)					
		(FOR U	SE WITH	FORM P	10-875)			<u> </u>		·				
					C		CLAIMS	•						
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* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

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